Notes from DDA Listening Session #4: Easton, Maryland

October 28, 2014

Self Advocate Session

This session was one of a series in each of the four regions of the State. There were separate listening sessions for self-advocates, families and providers in each region. Across all of the meetings, a number of themes emerged. These included the following:

- A desire for more frequent and understandable communication with DDA (both in writing and in person)
- A need for improved Resource Coordination (emphasizing the skills and activities that are important to the individuals and families served)
- A concern that the system lacks trust at all levels, and a strong desire to build partnerships (between the state and self-advocates, families, advocates and providers)
- A need for improved consistency and staff capacity at DDA

The feedback at each of these sessions was thoughtful and impassioned, shining a light on the need to work together to improve the system for individuals and families.

In each session, the facilitators asked the following questions:

What things are going well?

What are challenges/barriers and/or things you would like to change?

If changes are made to the system, what are things that should be kept?

The notes below reflect the feedback from the session participants. In some sessions, the comments mainly reflect areas where improvements are needed.

Areas for Improvement:		
	Need more flexible approach to services and supports	
	Recommend looking at WRAP and trauma informed model of service as something to expand	
	Staff retention is a big problem	
	Staff trained to support individuals with behavioral challenges is hard to find – behavior is communication and it is important to have people to support you that understand you.	
	Need better resources to help individuals with assistive technology – to really be able to use it as an effective communication tool takes training. Traditional therapies have not gotten very far – need expertise.	
	Support replication of peer supports	

Areas for Improvement:		
	Build better bridges with MHA.	
	Training for staff so that the first response to a behavior challenge is not the police – look at mobile crisis approach.	
	Timelines and understanding Medicaid eligibility is a problem for self advocates and families.	
	Need better info for self advocates to share with one another. One individual is very interested in speaking on disability issues.	
	Promote use of technology.	
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Notes:

While the group was small, this meeting was lively with much discussion regarding the need to support individuals with behavior support needs with well trained staff and trauma informed care.